 **Three Month Review Form.**

**Name:**

**Date:**

1. **How are you finding being a member of the QIP 3 months into the role?**
2. **What areas do you think are your strengths?**
3. **Where do you feel you have made an impact in the last 3 months?**
4. **What areas you do feel you are struggling with and why?**
5. **What further development do you feel you need that we can support you with, within the role?**
6. **Which areas do you feel need to be improved within the QIP?**

**Notes:**